



NEW YEAR'S DAY PARADE –Form 1

Organization Name _____

Contact Name _____

Address _____

Phone Number _____

Email _____

CIRCLE: Chief President Band Director Leader

CIRCLE: Float Marching Band Apparatus/Vehicles

Please list below all vehicles in line by order of movement thru the parade route:

YEAR	MFG/MODEL	BODYSTYLE/TYPE	GOM/WATER	LENGTH OF APPARATUS/VEHICLE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please check one:

_____ **We are happy to Participate**

_____ **We Respectfully decline.**